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PTO/SB/21 (08-03)

Approved for use through 08/30/2003. OMB 0651-0031

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/705,996	
	Filing Date	11/13/2003	
	First Named Inventor	Platteeuw	
	Art Unit	1615	
	Examiner Name	Unassigned	
Total Number of Pages in This Submission	14	Attorney Docket Number	SYN-0053

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please Identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	Copies of non-US patent documents (10 pages)
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	Remarks	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Mark R. Buscher Reg. No. 35,006
Signature	
Date	8/25/04

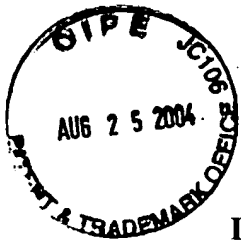
CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	Mark R. Buscher		
Signature		Date	

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of :
Johannes J. PLATTEEUW. : Examiner: Unassigned
Serial No. 10/705,996 : Group Art Unit: 1615
Filed: Nov. 13, 2003 : Docket No.: SYN-0053
For: Pharmaceutical Pellets Comprising Tamsulosin

INFORMATION DISCLOSURE STATEMENT (Supplemental)

Commissioner of Patents and Trademarks
P.O. Box 1450
Alexandria, VA 22313-1450

August 25, 2004

Sir:

Further to the Information Disclosure Statement filed August 18, 2004, applicant hereby submits a copy of the document listed on the attached PTO-1449 Form, for entry into the above-identified application and consideration by the Examiner.

This Information Disclosure Statement is being submitted before a first Office Action on the merits under 37 C.F.R. § 1.97(b), and thus no fee is due.

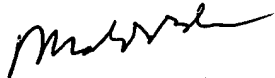
This Statement should not be construed as a representation that a search has been made, that information cited in the statement is considered to be and/or is material to patentability, or that information more material to examination of the present patent application does not exist. The Examiner is specifically requested not to rely solely on the document submitted herewith.

Having complied with rules 97 and 98, applicant requests that the listed document be officially considered by the Examiner, that the Examiner initial and return a copy of the 1449

Form, and that the listed document be printed among the "References Cited" on any patent to issue from this application.

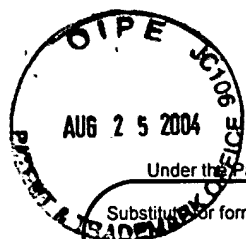
Should the Examiner have any questions regarding this application, the Examiner is requested to contact applicants' representative, Mark R. Buscher (Reg. No. 35,006) at telephone number 703 753 5256.

Respectfully submitted,



Mark R. Buscher
Registration No. 35,006

P.O. Box 161
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AUG 2 5 2004

PTO/SB/08B (08-03)

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Substitute for form 1449/PTO

**INFORMATION DISCLOSURE
STATEMENT BY APPLICANT**

(Use as many sheets as necessary)

Complete if Known

Application Number	10/705,996
Filing Date	11/13/2003
First Named Inventor	Platteeuw
Art Unit	
Examiner Name	
Attorney Docket Number	SYN-0053

Sheet 1 of 1

NON PATENT LITERATURE DOCUMENTS

Examiner Initials*	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
		RABASEDA and FITZPATRICK, "Tamsulosin: The First Prostate-Selective alpha 1a-Adrenoceptor Antagonist for Treatment of Symptomatic Benign Prostatic Hyperplasia," Drugs of Today, vol. 32, No. 3, 1996, pp 259-268	

Examiner
SignatureDate
Considered

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.

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